

UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK

-----	X	Civil Action No. 09-cv-4309 (WCC)
LOUIS FERRER and GLEN ALTOMENTE,	:	
Individually and on Behalf of All Other Persons	:	
Similarly Situated,	:	
	:	
	:	
	:	
	:	
	:	
Plaintiffs,	:	
	:	
vs.	:	
	:	
RAINES & WELSH & SONS, INC., RAINES &	:	
WELSH & SONS CONTRACTORS, INC.,	:	
THOMAS J. WELSH, DEBORAH WELSH,	:	
STEVEN RAINES and JOHN DOES #1-10,	:	
Jointly and Severally,	:	
	:	
Defendants.	:	
-----	X	

DECLARATION OF GLEN ALTOMONTE

**EXHIBIT “D”**

## DECLARATION OF GLEN ALTOMONTE

1. I worked for Raines & Welsh & Sons, Contractors, Inc. and/or its associated entities, successor, shareholders and assigns ("Defendant").

2. I worked for Defendant from on or about March 1988 through December 15, 2008 (the "time period"). I worked as a general laborer for the Defendants throughout the time period and was paid entirely on an hourly basis.

3. Throughout the last six years, I've earned \$26 to \$30 per hour. Pursuant to my union collective bargaining agreement, I am entitled to benefits which Defendants may or may not have paid. While I occasionally was paid overtime at a rate of time and one-half my hourly pay, my overtime hours worked were never properly recorded and were typically substantially reduced each week. At times I was paid cash for overtime worked.

4. I was classified as a non-exempt hourly union employee throughout the time period and my wages fluctuated based on the number of hours that I worked.

5. Throughout the time period, I was required to arrive at Defendants' construction yard location located at 102 Railroad Avenue, West Haverstraw, New York at approximately 7:00 am in order to load the trucks for the day and to prepare for the day. While I was required to arrive and start work at approximately 7:00 am, I was not paid by Defendants until 8:00 am. I was not allowed to take lunch breaks and was required to work for Defendants until approximately 4:30 each night. We were also frequently were required to work after 4:30 each night. Defendants' foreman typically kept track of hours worked each day, but the foreman sheet did not include time worked before 8:00

am. Further, Debbie Welsh processed payroll on a weekly basis, and she frequently removed hours worked such that I was not paid for the overtime reported by my foreman.

6. I was not compensated for the time that I worked prior to 8:00 am each day, or for overtime hours worked that were arbitrarily removed by Debi Welsh, Defendants' payroll processor.

7. Throughout the time period, I was subjected and witnessed numerous inappropriate racial slurs while on the job and Defendants did not let me or their other laborers use sanitary restroom facilities. In fact, Defendants required myself and their other laborers to relieve themselves outside on the property, not in the company restroom. Throughout the time period, buckets of excrement were left throughout the back of the Defendants' yard.

8. Upon information and belief, throughout the time period, Defendants employed twenty (20) to eighty (80) other laborers in their construction business who similarly were not paid for all hours worked and who had hours removed from their paychecks. Not only were all hours worked not recorded on the foreman's reports, but at the end of the week hours were removed from my and the other laborers' paychecks.

9. Throughout the time period, Defendants obtained government contracts whereby they were required to pay myself and their other laborers prevailing wages. Throughout the time period, I have never received prevailing wages, as required by state and federal law.

10. I am aware and have personal knowledge that during the time period other persons employed by Defendants as construction laborers who performed the same or similar work as myself were required to work more than 40 hours per week and had time deducted on foreman's reports and also had hours deducted from payroll, even if the hours were recorded in the foreman's report.

11. I am also aware of other similarly situated Raines & Welsh & Sons employees that were not paid wages or overtime by Defendants. I have spoken with numerous other construction laborers and they have confirmed that they too were forced to work more than forty hours per week without any compensation for hours worked prior to 8:00 am or for many other hours worked for the Defendants.

12. I complained about not being paid for hours worked and Tom Welsh told me that I wasn't getting paid overtime on gas jobs. My supervisor refused to address my issue of unpaid wages and overtime.

I declare under penalty of perjury that the foregoing is true and correct. Executed on this 9th day of April, 2009.

  
Glen Altomonte



Employee ID # <b>0019</b>		Employee Name <b>GLEN ALTIOMONTE</b>		Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>	
City <b>R390 01</b>	State <b>0300</b>	Check # <b>XXX-XX-2302</b>			
Period Start <b>JUN 2, 2008</b>	Period Ending <b>JUN 8, 2008</b>	Check Date <b>JUN 13, 2008</b>	FICA S.S. \$ 00		

  

EARNINGS			TAXES			DEDUCTIONS			YEAR TO DATE		
DESCRIPTION	HOURS	RATE	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT		
REGULAR	40.00	30.0500	1202.00	FICA	74.52	GARN-GA	759.60	GROSS	17068.41		
				MEDFICA	17.43			FICA	1058.24		
				FED WITH	220.19			MEDFICA	247.49		
				NY	65.51			FED WITH	2982.15		
				NY DIS.	0.60			STATE	900.00		
								DISAB	9.60		
<b>TOTAL</b>	<b>40.00</b>	<b>\$</b>	<b>1202.00</b>	<b>TOTAL \$</b>	<b>378.25</b>	<b>TOTAL \$</b>	<b>759.60</b>	Check No.	0050112		
								NET PAY	*****64.15		

Employee File # 0019	Employee Name GLEN ALTOMONTE	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>	
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008

EARNINGS		TAXES		DEDUCTIONS		YEAR TO DATE	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	40.00	FICA	71.72	GARN-GA	506.60	GROSS	28660.21
		MEDFICA	16.78	LCL 754	136.00	FICA	1776.93
		FED WTH	220.19			MEDFICA	415.57
		NY	65.51			FED WTH	5070.94
		NY DIS.	0.14			STATE	1522.69
						DISAB	15.60
<b>TOTAL</b>	<b>40.00</b>	<b>TOTAL \$</b>	<b>776.34</b>	<b>TOTAL \$</b>	<b>642.60</b>	<b>NET PAY</b>	<b>*****185.05</b>

Employee File # 0019	Employee Name GLEN ALTOMONTE	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>	
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008
Cal # R390 01	Cal # 0300	Cal # AUG 11, 2008	Cal # AUG 17, 2008

EARNINGS		TAXES		DEDUCTIONS		YEAR TO DATE	
DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	32.00	FICA	59.63	GARN-GA	506.60	GROSS	41048.33
		MEDFICA	13.93	LCL 754	108.80	FICA	2545.00
		FED WTH	160.09			MEDFICA	595.20
		NY	49.05			FED WTH	7244.78
						STATE	2173.78
						DISAB	22.20
<b>TOTAL</b>	<b>32.00</b>	<b>TOTAL \$</b>	<b>282.70</b>	<b>TOTAL \$</b>	<b>615.40</b>	<b>NET PAY</b>	<b>*****63.50</b>

Employee No. # <b>0019</b>	Employee Name <b>GLEN ALTONMONTE</b>	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>	
Card # <b>R390 01</b>	Date # <b>0300</b>	Card # <b>XXX-XX-2309</b>	
Period Start <b>AUG 18, 2008</b>	Period Ending <b>AUG 24, 2008</b>	Check Date <b>AUG 29, 2008</b>	Pay Stk # <b>ST. S 00</b>

EARNINGS				TAXES				DEDUCTIONS				YEAR TO DATE			
DESCRIPTION	HOURS	RATE	AMOUNT	DESCRIPTION	AMT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	32.00	30.0500	961.60	FICA	55.62	GARN-GA	506.60	GROSS	29621.81						
				MEDFICA	13.95	LCL 754	108.80	FICA	1836.55						
				FED WTH	160.09			MEDFICA	429.52						
				NY	49.05			FED WTH	5231.03						
				NY DIS.	0.60			STATE	1571.74						
								DISAB	16.20						
<b>TOTAL</b>	<b>32.00</b>	<b>\$</b>	<b>961.60</b>	<b>TOTAL \$</b>	<b>283.31</b>	<b>TOTAL \$</b>	<b>615.40</b>	Check No.	0050525	NET PAY	*****62.89				

Employee No. # <b>0019</b>	Employee Name <b>GLEN ALTONMONTE</b>	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>	
Card # <b>R390 01</b>	Date # <b>0300</b>	Card # <b>XXX-XX-2309</b>	
Period Start <b>JUL 7, 2008</b>	Period Ending <b>JUL 13, 2008</b>	Check Date <b>JUL 18, 2008</b>	Pay Stk # <b>ST. S 00</b>

EARNINGS				TAXES				DEDUCTIONS				YEAR TO DATE			
DESCRIPTION	HOURS	RATE	AMOUNT	DESCRIPTION	AMT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	40.00	30.0500	1202.00	FICA	74.52	GARN-GA	759.60	GROSS	23078.41						
				MEDFICA	17.43			FICA	1430.86						
				FED WTH	220.19			MEDFICA	334.64						
				NY	65.51			FED WTH	4083.10						
				NY DIS.	0.60			STATE	1227.55						
								DISAB	12.60						
<b>TOTAL</b>	<b>40.00</b>	<b>\$</b>	<b>1202.00</b>	<b>TOTAL \$</b>	<b>378.25</b>	<b>TOTAL \$</b>	<b>759.60</b>	Check No.	0050274	NET PAY	*****64.15				



Employee ID # 0019	Employee Name GLEN ALTONMONTE	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS,</b> CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984
Card # R390 01	Card # 0300	Sec Dis # XXX-XX-2309
Period Start JUL 21, 2008	Period End JUL 27, 2008	Pay S NO
AUG 1, 2008		

**EARNINGS****TAXES****DEDUCTIONS****YEAR TO DATE**

DESCRIPTION	IN QTR	RATE	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	20.00	30.0500	601.00	FICA	37.26	GARN-GA	454.93	GROSS	24881.41
				MEDFICA	8.71			FICA	1542.65
				FED WTH	75.15			MEDFICA	360.78
				NY	24.35			FED WTH	4378.44
				NY DIS.	0.60			STATE	1317.41
								DISAB	13.80
<b>TOTAL</b>	<b>20.00</b>	<b>\$</b>	<b>601.00</b>	<b>TOTAL \$</b>	<b>146.07</b>	<b>TOTAL \$</b>	<b>454.93</b>	Check No 0050353	NET PAY *****0.00

Employee ID # 0019	Employee Name GLEN ALTONMONTE	Company Name & Address <b>RAINES &amp; WELSH &amp; SONS,</b> CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984
Card # R390 01	Card # 0300	Sec Dis # XXX-XX-2309
Period Start SEP 8, 2008	Period End SEP 14, 2008	Pay S NO
SEP 19, 2008		

**EARNINGS****TAXES****DEDUCTIONS****YEAR TO DATE**

DESCRIPTION	HOURS	RATE	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT	DESCRIPTION	AMOUNT
REGULAR	40.00	30.0500	1202.00	FICA	74.53	GARN-GA	506.60	GROSS	31785.41
				MEDFICA	17.43			FICA	1970.70
				FED WTH	220.19	LCL 754	136.00	MEDFICA	460.89
				NY	65.51			FED WTH	5611.31
				NY DIS.	0.60			STATE	1686.30
								DISAB	17.40
<b>TOTAL</b>	<b>40.00</b>	<b>\$</b>	<b>1202.00</b>	<b>TOTAL \$</b>	<b>378.26</b>	<b>TOTAL \$</b>	<b>642.60</b>	Check No 0050647	NET PAY *****181.14



Employee No. # <b>0019</b>		Employee Name <b>GLEN ALTOMONTE</b>		Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>			
Card # <b>R390 01</b>	Date # <b>0300</b>	Card # <b>XXX-XX-2309</b>	Card # <b>SEP 29, 2008</b>	Card # <b>OCT 5, 2008</b>	Card # <b>OCT 10, 2008</b>	Card # <b>SEP 29, 2008</b>	Card # <b>OCT 5, 2008</b>
<b>EARNINGS</b>				<b>TAXES</b>			
DESCRIPTION <b>REGULAR</b>	HOURS <b>40.00</b>	RATE <b>30.0500</b>	AMOUNT <b>1202.00</b>	DESCRIPTION <b>FICA MEDFICA FED WITH NY NY DIS.</b>	AMOUNT <b>74.53 17.43 220.19 65.51 0.60</b>	DESCRIPTION <b>GARN-GA LCL 754</b>	AMOUNT <b>506.60 136.00</b>
<b>TOTAL 40.00 \$ 1202.00</b>				<b>TOTAL \$ 378.25</b>			
<b>TOTAL 40.00 \$ 1202.00</b>				<b>TOTAL \$ 642.60</b>			
<b>YEAR TO DATE</b>				<b>YEAR TO DATE</b>			
<b>NET PAY *****181.15</b>				<b>NET PAY *****181.15</b>			

Employee No. # <b>0019</b>		Employee Name <b>GLEN ALTOMONTE</b>		Company Name & Address <b>RAINES &amp; WELSH &amp; SONS, CONTRACTORS, INC. P.O. BOX 85 THIELLS, NY 10984</b>			
Card # <b>R390 01</b>	Date # <b>0300</b>	Card # <b>XXX-XX-2309</b>	Card # <b>JUL 14, 2008</b>	Card # <b>JUL 20, 2008</b>	Card # <b>JUL 25, 2008</b>	Card # <b>JUL 14, 2008</b>	Card # <b>JUL 20, 2008</b>
<b>EARNINGS</b>				<b>TAXES</b>			
DESCRIPTION <b>REGULAR</b>	HOURS <b>40.00</b>	RATE <b>30.0500</b>	AMOUNT <b>1202.00</b>	DESCRIPTION <b>FICA MEDFICA FED WITH NY NY DIS.</b>	AMOUNT <b>74.53 17.43 220.19 65.51 0.60</b>	DESCRIPTION <b>GARN-GA LCL 754</b>	AMOUNT <b>506.60 136.00</b>
<b>TOTAL 40.00 \$ 1202.00</b>				<b>TOTAL \$ 378.26</b>			
<b>TOTAL 40.00 \$ 1202.00</b>				<b>TOTAL \$ 642.60</b>			
<b>YEAR TO DATE</b>				<b>YEAR TO DATE</b>			
<b>NET PAY *****181.14</b>				<b>NET PAY *****181.14</b>			